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SEP 2 6 2006	this form, together w		or <u>F</u>	Commissioner for P.O. Box 1450 Alexandria, Virg ax (571)-273-2885	or Patents ginia 22313-1450	chould be completed where
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				Peter Ganjian		(Depositor's name)
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				26 9	Jeg 2006	(Date)
APPLICATION NO.	FILING DATE	_	FIRST NAMED IN	VENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/717,081	11/19/2003	/2003 Motohiko Bungo		ingo	P03-1003	7003
TITLE OF INVENTION: #	VDICATOR FOR MEMORY	Y MODULE I	NDICA	TOR DEI	VICE P.G.	ept 2006
APPLN. TYPE	SMALL ENTITY	ISSUE F	EE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400)	\$300	\$1700	09/27/2006
EXAMINER		ART UNIT		CLASS-SUBCLASS]	
SCHLIE, PAUL W		2186		711-156000	•	
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3. ASSIGNEE NAME AND	RESIDENCE DATA TO B	E PRINTED ON T	HE PATENT (no	int or type)		

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.	Peter Ganjian 2 3
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4a. The following fee(s) are enclosed: Solution Sol	4b. Payment of Fee(s): A check in the amount of the fee(s) is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number			
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Typed or printed name _	Peter Ganjian	Registration No. 43,991	

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